

Application for Employment

UNITED STATES PROBATION OFFICE

SOUTHERN DISTRICT OF INDIANA

Type or **print** all information. If your application does not provide all information requested, you may lose consideration for a job.

Name: _____

Daytime Phone: _____

Evening Phone: _____

Position Applying For: _____

Announcement Number: _____



A part of the United States District Court, the United States Probation Office for the Southern District of Indiana assists the Court in both probation and pretrial functions through investigating and supervising individuals charged with or convicted of Federal crimes. The Probation Office provides coverage for 60 counties in Southern Indiana. In addition to the headquarters office in Indianapolis, divisional offices are located in Bloomington, Evansville, Muncie, New Albany, and Terre Haute.

Return completed application to:

U.S. Probation Office
Attn: Personnel - CONFIDENTIAL
101 U.S. Courthouse
46 East Ohio Street
Indianapolis, IN 46204

U.S. PROBATION OFFICE - SOUTHERN INDIANA
APPLICATION FOR EMPLOYMENT

Announcement No.: _____

If You Need Additional Space, Continue Under "Remarks" Listing Item Number

1. Name Last, First, Middle Initial 2. Phone Number 3. Social Security Number

4. Present Address 5. Place of Birth

6. Other Names Previously Used for Employment Purposes 7. Date of Birth
(Include **only** if applying
for Hazardous Duty position)

City

State

Foreign Country

GENERAL

8. Are you a U.S. Citizen? YES () NO () -- Give the Country of your citizenship

9. a. Were you ever a Federal civilian employee? YES () NO () -- For highest civilian grade give: _____ / _____
series grade

b. Are you receiving a Federal annuity payment? YES () NO ()

10. Do you have any relatives that are Judges, Officers or employees of the United States Courts? If so, give their names, positions, and relationships to you.

11. Have you ever been discharged from a position or asked to resign under the threat of discharge? () YES () NO If yes, explain under Remarks at the end of this form.

12. Have you ever been convicted? () YES () NO (You may omit: (1) offenses committed before your 18th birthday and adjudicated under a juvenile offender law; (2) offenses adjudicated under a youth offender law; (3) offenses as to which the record has been expunged; (4) minor traffic violations for which you paid a fine of \$100 or less). If yes, explain under Remarks at the end of this form.

EDUCATION

13. a. Do you have a high school diploma or G.E.D. equivalent? () YES () NO

b. Name and location of colleges or universities attended (including law schools)	Dates Attended	Number of Credit Hours		Degree	Date Received	Grade Point Average and/or scholastic standing
		Quarter	Semester			
Chief Undergraduate Subjects	Credit Hours Quarter Semester	Chief Undergraduate Subjects				Credit Hours Quarter Semester

c. Special skills, accomplishments, awards, honors, fraternities, sororities & societies (Specify) () YES () NO

d. Other schools or training such as trade, vocational, Armed Forces, or business. Give for each: Name and location of school, dates attended, subject studied, certificates, and any other pertinent data.

MILITARY SERVICE

14. a. Have you ever served on active duty with the military? () YES () NO If yes, attach a copy of DD 214, Notice of Separation

b. Are you retired from military service? () YES () NO

APPLICANTS FOR LEGAL POSITIONS

15. a. Are you admitted to the Bar? () YES () NO If yes, list the Bar(s) to which admitted and dates of admission:

Is your Bar membership () Active () Inactive

b. Did you attend a Bar review course? () YES () NO List type of course:

Dates Attending: From: _____ To _____

WORK EXPERIENCE

Start with your present position and work back 10 years. Include experience while in military service and unpaid experience if the unpaid experience is related to the position for which you are applying. If you were unemployed for longer than three (3) months within the past ten (10) years, list the dates and your address(es) in an experience block. Use additional page(s) if necessary, providing all requested information for all positions.

A

Dates of Employment (<i>month, day, year</i>) From: _____ To: _____		Number of hours worked per week:		Exact Title of Your Position	
Salary or Earnings Starting: \$ _____ Per _____ Final: \$ _____ Per _____		Classification Grade/Level (If in Federal service)		Place of Employment City _____ State or Country _____	
Name and Address of Employer (<i>firm, organization, etc.</i>)		Name and Title of Immediate Supervisor			
Business Telephone: Area Code _____ Number _____		Number of Employees Supervised			
Reason for Leaving					
Description of Work					

B

Dates of Employment (<i>month, day, year</i>) From: _____ To: _____		Number of hours worked per week:		Exact Title of Your Position	
Salary or Earnings Starting: \$ _____ Per _____ Final: \$ _____ Per _____		Classification Grade/Level		Place of Employment City _____ State or Country _____	
Name and Address of Employer (<i>firm, organization, etc.</i>)		Name and Title of Immediate Supervisor			
Business Telephone: Area Code _____ Number _____		Number of Employees Supervised			
Reason for Leaving					
Description of Work					

REMARKS: (*Use this space for continuation of answers. List the number of items being continued.*)

CONTINUATION SHEET AO-78

If you need more experience blocks, continue in this format, including your name and Social Security Number on each additional sheet.

Dates of Employment (<i>month, day, year</i>) From: _____ To: _____	Number of hours worked per week:	Exact Title of Your Position	
Salary or Earnings Starting: \$ _____ Per _____ Final: \$ _____ Per _____	Classification Grade/Level	Place of Employment City _____ State or Country _____	Kind of Business or Organization
Name and Address of Employer (<i>firm, organization, etc.</i>)		Name and Title of Immediate Supervisor	
Business Telephone: Area Code _____ Number _____		Number of Employees Supervised	
Reason for Leaving			
Description of Work			

Dates of Employment (<i>month, day, year</i>) From: _____ To: _____	Number of hours worked per week:	Exact Title of Your Position	
Salary or Earnings Starting: \$ _____ Per _____ Final: \$ _____ Per _____	Classification Grade/Level	Place of Employment City _____ State or Country _____	Kind of Business or Organization
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Name and Address of Employer (<i>firm, organization, etc.</i>)		Name and Title of Immediate Supervisor	
Business Telephone: Area Code _____ Number _____		Number of Employees Supervised	
Reason for Leaving			
Description of Work			

GENERAL INFORMATION

1. Within the last ten years have you quit a job after being notified that you would be fired, did you leave any job by mutual agreement because of specific problems, or were you debarred from Federal employment by the Office of Personnel Management? If "YES", use the space below to provide the date, an explanation of the problem and reason for leaving, and the employer's name and address. YES [] NO []
2. Have you ever been convicted, been imprisoned, forfeited collateral, been on probation or parole? (Include felonies, firearms or explosives violations, misdemeanors, and all other offenses.) If "YES", use the space below to provide the date, explanation of the violation, place of occurrence, and the name and address of the police department or court involved. YES [] NO []
3. Have you been convicted by a military court-martial in the past ten years? (If no military service, answer "NO".) If "YES", use the space below to provide the date, explanation of the violation, place of occurrence, and the name and address of the military authority or court involved. YES [] NO []
4. Are you delinquent on any Federal debt? (Include delinquencies arising from Federal taxes, loans, overpayment of benefits, and other debts to the U.S. Government, plus defaults of Federally guaranteed or insured loans such as student and home mortgage loans.) If "YES", use the space below to provide the type, length, and amount of the delinquency or default and steps that you are taking to correct the error or repay the debt. YES [] NO []

CONTINUATION SPACE Attach additional sheets if necessary to explain any of the above responses. Be sure to identify attached sheets with your name and Social Security Number.

May we ask your present employer about your character, qualifications, and work record? A "NO" will not affect our review of your qualifications. If you answer "NO" and we need to contact your present employer before we can offer you a job, we will contact you first. () YES () NO

APPLICANT CERTIFICATION: I certify that, to the best of my knowledge and belief, all of the information on and attached to this application is true, correct, complete, and made in good faith. I understand that false or fraudulent information on or attached to this application may be grounds for not hiring me, or firing me after I begin work, and may be punishable by fine or imprisonment. I understand that any information I give may be investigated. I understand employment is at will and is subject to termination by the Court.

SIGNATURE

DATE SIGNED
